



**SAN DIEGO POLICE DEPARTMENT
PERMITS AND LICENSING UNIT
1400 'E' STREET, MS-735, SAN DIEGO, CA 92101
(619) 531-2250**



PAWNBROKERS

San Diego Municipal Code, Section 33.0101(c), states you must have a valid police permit to operate a business designated as police regulated. You are responsible for being familiar with and complying with the rules and regulations related to Pawnbrokers. Copies of the Pawnbroker and General Divisions for police regulated activities may be obtained from the City Clerk's office located at 202 C Street, 2nd Floor, Telephone # (619) 533-4000 or via the City's website: www.sannet.gov / (Department, City Clerk, Documents, Municipal Code, SDMC Chapter 3, Article 3, Division 1.1 and Divisions 1-5).

**ALL NEW APPLICATIONS MUST BE SUBMITTED IN PERSON.
INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.**

The granting of a police permit does not relieve the applicant from obtaining all appropriate approvals required by the City of San Diego, or state or federal law. The granting of a permit does not relieve a permittee from the permittee's obligation to comply with all applicable local, state, and federal laws, including those related to building, zoning, and fire, and other public safety regulations. The granting of a police permit does not vest any development rights in the property or business (SDMC 33.0309). In order to legally operate your business and to establish that your business location is suitable, it is suggested that you first obtain the following:

ZONING APPROVAL can be obtained from the City of San Diego Development Services, 1222 First Avenue (3rd Floor), San Diego, CA 92101 - Telephone (619) 446-5000.

PLEASE PROVIDE ALL OF THE FOLLOWING WHEN APPLYING FOR THE POLICE PERMIT:

- **POLICE PERMIT APPLICATION** and **BUSINESS ADDENDUM** - Each corporate officer or partner is deemed an applicant and must provide an application. An applicant who is a corporation or partnership shall designate one of its officers or general partners to act as its responsible managing officer. The responsible managing officer may complete, sign and submit all applications on behalf of the corporate officers and partners. A criminal records check will be made on each applicant. A 30-day investigation period begins at the time the complete application is submitted.
- **BUSINESS TAX CERTIFICATE** can be obtained from the San Diego City Treasurer's Office, 1200 Third Avenue (1st Floor), San Diego, CA 92101 - Telephone (619) 615-1500.
- **INVESTIGATION FEE** - Cash, check, cashier's check or money order for a **non-refundable** application fee of \$104.00 per applicant payable to **CITY TREASURER**.
- **REGULATORY FEE** - Annual Regulatory Fee \$249.00. Cash, check, cashier's check or money order for an annual regulatory fee must be submitted along with your application payable to **CITY TREASURER**.
- **LIVE SCAN FINGERPRINTS** are required for all new applicants. Fill out the attached "Request for Live Scan Service" form and bring it with you to the Live Scan agency. See attached list of locations. **Note:** Completed Live Scan fingerprints must be submitted with the application within thirty days.
- **IDENTIFICATION** - Valid government issued picture identification card (driver's license or military ID).
- **STATE APPLICATION** - A completed **State of California application for Pawn Shop** must be submitted along with a **separate** business check, money order or cashier's check in the amount of **\$195.00** made payable to the **Department of Justice**. This form can be obtained at time of application with the Permits & Licensing Office.
- **LIMITED PARTNERSHIP** - A copy of the limited partnership's certificate of limited partnership as filed with the County Clerk (if applicable).
- **LEASE** - A copy of your lease or rental agreement and amendments for the property where the business is to be conducted.
- **CORPORATION** - A copy of the Articles of Incorporation from the State of California must be submitted if a corporation is applying.
- **FINANCIAL STATEMENT** confirming liquid assets in the amount of \$100,000. The financial statement shall be filed by the applicant under penalty of perjury and signed by a California Certified Public Accountant verifying that he/she has reviewed the financial statement.
- **TWO-YEAR NON-REVOCABLE SURETY BOND** of \$20,000 in favor of the State of California.



SAN DIEGO POLICE DEPARTMENT - PERMITS AND LICENSING
1400 'E' STREET, MS-735, SAN DIEGO, CA 92101
Telephone No.: (619) 531-2250



APPLICATION

TYPE OF PERMIT: _____

☐ Owner ☐ Employee ☐ Partner ☐ Corporate Officer ☐ LLC

Date of Birth: _____ Driver's License/ID #: _____ State: _____

Applicant's Full Name: _____
Last First Middle

Other Names Used: (Maiden, Alias, Etc.) _____ Stage Name: _____

Residence Address: _____ City, State, Zip: _____

Mailing Address: _____ City, State, Zip: _____

Res. Ph. () _____ Bus. Ph. () _____ Cell Ph. () _____ Fax () _____

Internet Web Site Address/Auction Site User Name: _____

Soc. Sec. #: _____ Place of Birth: _____

Eyes: _____ Hair: _____ Height: _____ Weight: _____ Race: _____ Sex: _____

Business Where Applicant Expects to be Employed:

Business Name: _____ D.B.A.: _____

Business Address: _____ City, State, Zip: _____

1. List previous residence addresses for the last five (5) years:

	Complete Addresses last five years	Year Date From	Year Date To
1			
2			
3			
4			
5			

FOR OFFICE USE ONLY

App. Date: _____ Permit Number: _____ Received by: _____ ☐ Live Scan Rec: _____

Records Check: _____
Initials/ID #

☐ RI01 ok or _____

Approving PCCO: _____ Date: _____

2. List previous occupations, places of employment and/or schooling for the last five (5) years.

1	PLACE OF EMPLOYMENT	OCCUPATION	
	ADDRESS & PHONE	DATE FROM	DATE TO
2	PLACE OF EMPLOYMENT	OCCUPATION	
	ADDRESS & PHONE	DATE FROM	DATE TO
3	PLACE OF EMPLOYMENT	OCCUPATION	
	ADDRESS & PHONE	DATE FROM	DATE TO
4	PLACE OF EMPLOYMENT	OCCUPATION	
	ADDRESS & PHONE	DATE FROM	DATE TO
5	PLACE OF EMPLOYMENT	OCCUPATION	
	ADDRESS & PHONE	DATE FROM	DATE TO

3. List similar permits or licenses issued by any agency or board, or any city, county, state or federal agency in the past five (5) years. IF NONE, INITIAL HERE: _____

	TYPE OF LICENSE	LICENSE NUMBER	DATES HELD	CITY AND STATE
1.				
2.				
3.				

4. Have you ever had any permit or license issued by any agency or board, or any city, county, state or federal agency suspended or revoked? Yes () No ()

If yes, please complete below:

	CITY/STATE	DATE OF SUSPENSION OR REVOCATION	REASON
1.			
2.			
3.			

5. List all criminal convictions, except traffic convictions. Include pleadings of guilty to a lesser charge in satisfaction of, or as a substitute for, an original charge, and pleadings of *nolo contendere*. Expunged convictions must be listed per California Penal Code section 1203.4(a).

IF NONE, INITIAL HERE: _____

	CHARGE	DATE CONVICTED	LOCATION OF COURT
1			
2			
3			
4			
5			
6			

APPLICANTS: The right of reasonable inspection shall be a condition for issuance of a police permit. If a permit is issued, representatives of the police department shall have access to the business premises during normal business hours, which may include entry into the non-public portion of the business.

It is the responsibility of the permit holder to renew the permit no later than ten (10) calendar days after the expiration date on the permit. Failure to renew on time will result in penalty fee of \$25.00 plus 10% of the regulatory fee. If a renewal is not completed with all fees and penalties paid within thirty (30) days after the permit expiration date, the permit expires and business operations, occupations, or activities allowed by the permit must cease. A permittee must then begin the application process as a new applicant (Section 33.0308 of the San Diego Municipal Code).

I declare under penalty of perjury that the statements made on this application, including accompanying documents, are true, complete and correct to the best of my knowledge and belief. I understand that any false statements or information are grounds for denial of this application or loss of licensure and that I may be subject to prosecution per section 11.0401(b) of the San Diego Municipal Code.

I AM AWARE THAT THE INVESTIGATION FEE IS NON-REFUNDABLE. I AM AWARE THAT I AM RESPONSIBLE FOR BEING FAMILIAR WITH AND COMPLYING WITH THE RULES AND REGULATIONS RELATED TO THE POLICE REGULATED BUSINESS OR OCCUPATION FOR WHICH I AM APPLYING. I AM AWARE THAT THE GRANTING OF A POLICE PERMIT DOES NOT RELIEVE ME FROM OBTAINING PERMITS OR APPROVALS REQUIRED BY THE CITY OF SAN DIEGO OR STATE OR FEDERAL LAW. I AM AWARE THAT THE GRANTING OF A POLICE PERMIT DOES NOT RELIEVE ME FROM COMPLYING WITH ALL APPLICABLE LOCAL, STATE, AND FEDERAL LAWS, INCLUDING THOSE RELATED TO BUILDING, ZONING, AND FIRE, AND OTHER PUBLIC SAFETY REGULATIONS. I AM AWARE THAT THE GRANTING OF A POLICE PERMIT DOES NOT VEST ANY DEVELOPMENT RIGHTS IN THE PROPERTY OR BUSINESS.

APPLICANT'S SIGNATURE

DATE OF APPLICATION

PLEASE BE ADVISED THE INFORMATION YOU PROVIDE ON YOUR APPLICATION MAY BE SUBJECT TO PUBLIC DISCLOSURE PER THE CALIFORNIA PUBLIC RECORDS ACT.



Police Permit Application BUSINESS ADDENDUM

SAN DIEGO POLICE DEPARTMENT

1400 'E' STREET · M.S. 735 · SAN DIEGO, CA 92101

PLEASE COMPLETE ALL SECTIONS IF APPLICABLE
(TYPE OR PRINT LEGIBLY)



TYPE OF PERMIT: _____ LOCATION: _____

☐ Sole Owner ☐ Partnership ☐ Corporation ☐ LLC

Business Name: _____ D.B.A. _____

Business Address : _____ City & Zip: _____

Mailing Address: _____ City & Zip: _____

Business Tax Certificate # _____

LIST ALL FICTITIOUS NAMES THE BUSINESS WILL OPERATE OR ADVERTISE UNDER:

	FICTITIOUS NAME	PHONE #
1		
2		
3		
4		

IF APPLICANT IS A CORPORATION:

NAME OF CORPORATION AS SHOWN IN ARTICLES OF INCORPORATION OR CHARTER	DATE OF INCORPORATION	STATE OF INCORPORATION

NAMES AND RESIDENCE ADDRESSES OF EACH CURRENT CORPORATE OFFICER AND DIRECTOR:

NAME	RESIDENCE ADDRESS	TITLE
		PRESIDENT
		VICE PRESIDENT
		SECRETARY
		TREASURER

FOR OFFICE USE ONLY

DATE FILED:		
RECEIVED BY:		
DEVELOPMENT SERVICES – ZONING		FIRE & LIFE SAFETY DEPARTMENT
APPROVED BY:		APPROVED BY:
DATE: PHONE:		DATE: PHONE:
APPROVING OFFICER: _____		DATE: _____

IF PARTNERSHIP, LIST NAME AND RESIDENCE ADDRESS OF EACH PARTNER, INCLUDING LIMITED PARTNERS:

NAME	RESIDENCE ADDRESS	TITLE

LIST FULL TRUE NAME AND ANY OTHER NAMES USED BY THE OWNERS AND ANY PERSONS WHO EXERCISE CONTROL OVER THE OPERATION, MANAGEMENT, DIRECTION OR POLICY OF THE BUSINESS, OR WHO ARE RESPONSIBLE FOR THE DAILY OPERATION OF THE BUSINESS:

	FULL NAME	TITLE
1		
2		
3		
4		
5		

APPLICANT'S PREMISES ARE ☐ OWNED ☐ LEASED/RENTED

IF RENTED OR LEASED, PLEASE PROVIDE THE NAME AND ADDRESS OF THE PROPERTY OWNER(S):

PROPERTY OWNER'S NAME	PROPERTY OWNER'S ADDRESS	PHONE #

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I declare under penalty of perjury that the statements made on this application, including accompanying documents, are true, complete and correct to the best of my knowledge and belief. I understand that any false statements are grounds for denial of this application or loss of licensure and that I may be subject to prosecution per section 11.0401(b) of the San Diego Municipal Code.

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APPLICANT'S SIGNATURE

DATE OF APPLICATION

RESPONSIBLE PERSON COMPLETING APPLICATION IF NOT APPLICANT - PRINT & SIGN

TITLE/POSITION

**INSTRUCTIONS FOR COMPLETING
THE PAWNBROKER / SECONDHAND DEALER REPORT
JUS 123 FORM**

Every licensed dealer must complete a JUS 123 form for each item of tangible personal property purchased, taken in trade, taken in pawn or accepted for sale on consignment. All information must be legible, accurate, complete and prepared in English.

You must be reasonably sure that the person you are receiving property from has the legal right to sell or deliver it.

Use one of the following documents to verify the identity of the intended seller or pledgor, provided the document is currently valid or has been issued within five (5) years.

1. A passport of the United States.
2. A driver's license issued by any state or Canada.
3. An identification card issued by any state.
4. An identification card issued by the United States.
5. A passport from any other country in addition to another item of identification bearing an address.

Refer all questions on completing this form to your local law enforcement agency.

CUSTOMER INFORMATION

Customer's Name – Please print clearly LAST name first, then FIRST name, and MIDDLE name last.

Personal Description:

Sex Box – Indicate “M” for Male or “F” for Female for SEX notation.

Race Box – Select one of the following race codes that best describes the pledgor or seller – “W” (White), “B” (Black), “H” (Mexican/Hispanic or Latin), “I” (American Indian), “A” (Asian), “O” (Other).

Hair Box – Select one of the following hair color codes – “BLK” (Black), “BRO” (Brown), “BLN” (Blond), “Bal” (Bald), “GRY” (Gray), “RED” (Red), “WHT” (White).

Eyes Box – Select one of the following eye color codes – “BLK” (Black), “BLU” (Blue), “BRO” (Brown), “GRY” (Gray), “HAZ” (Hazel), “GRN” (Green).

Height Box – Indicate pledgor or seller's height in feet and inches.

Weight Box – Indicate pledgor or seller's weight in pounds.

Birthdate Box – Indicate pledgor or seller's birthday by six (6) numeric characters of month, day and year (i.e. 12/23/84).

**INSTRUCTIONS FOR COMPLETING
THE PAWNBROKER / SECONDHAND DEALER REPORT
JUS 123 FORM**

Driver's License Number or Other Identification – List the pledgor or seller's license number or other identification, the state of issuance, the date of issuance or the year of expiration of the driver's license.

Address – Indicate the pledgor or seller's residence, city, state and zip code.

STORE INFORMATION

Store License Number – Enter the hyphenated eight (8) character number shown on your pawnbroker / secondhand dealer license in the box.

Police Division – If your business is located within the jurisdiction of a large law enforcement agency, contact that agency for instructions on what to enter; otherwise, leave blank.

Store Name and Address – Indicate your business name, address, city, state and zip code.

ITEM INFORMATION

Article, Brand Name, Serial Number, Model – Enter the information specified in the appropriate spaces. Enter owner-applied number or inscriptions appearing on an item in the PROPERTY DESCRIPTION block. If no serial number, leave this space blank.

Property Description – Must include size, color, material, etc. "Scrap gold" and "scrap silver" are not acceptable descriptions. However, "gold ring mounting" and "sterling silver flatware" are examples of acceptable descriptions.

TRANSACTION

Transaction Date – Indicate current month, day and year.

Loan Buy Number – This number must be unique for each transaction and should not be duplicated.

Time – Indicate the time of the transaction and check the appropriate AM or PM box.

Amount – Place the transaction amount of the article.

Transaction – Check the appropriate transaction type: pawn, buy, consignment or trade.

**INSTRUCTIONS FOR COMPLETING
THE PAWNBROKER / SECONDHAND DEALER REPORT
JUS 123 FORM**

FIREARMS ONLY

Firearms – If a firearm is taken in pledge or purchased, enter the information specified in the FIREARMS ONLY spaces. Do not enter firearms in the ITEM spaces.

Customer's Signature – Form must be signed by the person offering the property.

Store Person's Signature – Form must be legibly signed by the person accepting the property.

Customer's Right Thumb Print – Required on the original report. (may be on back or front)

Voided receipt forms must be retained in your files, and if required, copies must be submitted to your local law enforcement agency.

**NOTICE – Falsification of information may lead to criminal prosecution,
loss of license, or both.**

ORDERING FORMS: Pawnbrokers / Secondhand Dealers Reporting Forms (JUS 123) are available in multiples of approximately 400 slips at a cost of \$24.95. Address orders to and make checks payable to Department of Justice:

**Department of Justice
Secondhand Dealer/Pawnbroker Licensing Unit
Attn: Room G257
P.O. Box 903387
Sacramento, CA 94203-3870
Mathew Parra
916-227-3688**

Please affix your Secondhand Dealer/Pawnbroker License number on the check.

**INSTRUCTIONS FOR COMPLETING
THE PAWNBROKER / SECONDHAND DEALER REPORT
JUS 123 FORM**

PLEASE PRINT CLEARLY		PAWNBROKER/SECONDHAND DEALER REPORT										JUS 123 (7/88)							
		WHITE COPIES-LAW ENFORCEMENT/YELLOW-DOJ/PINK-DEALER																	
C U S T O M E R	LAST NAME											FIRST NAME		MIDDLE NAME					
	SEX	RACE	HAIR	EYES	HEIGHT	WEIGHT	BIRTHDATE				TRANSACTION DATE								
	DRIVER'S LICENSE NO. OR OTHER I.D.		STATE	DATE OF ISSUANCE		MO/	DAY/	YR/	LOAN/BUY NUMBER										
	ADDRESS/CITY/STATE												TIME	AM PM	AMOUNT \$				
	LICENSE NUMBER				POLICE DIVISION				TRANSACTION: PAWN <input type="checkbox"/>		BUY <input type="checkbox"/> CONSIGN <input type="checkbox"/> TRADE <input type="checkbox"/>		MAKE						
S I G N E R	NAME												MODEL						
	ADDRESS/CITY												SERIAL NO.						
	ARTICLE				BRAND NAME				CAL/GAUGE										
I T E M	SERIAL NO.				MODEL				CHECK ONE		CHECK ONE								
	PROPERTY DESCRIPTION (One item only; Size, Color, Material, etc.)												HANDGUN <input type="checkbox"/> (PISTOL)		REVOLVER <input type="checkbox"/>				
<p>CUSTOMER'S SIGNATURE I certify under penalty of perjury that to my knowledge and belief the information above is true and complete and I am the owner, or have the authority of the owner, to sell or pledge the property.</p> <p>STORE PERSON'S SIGNATURE</p>												RIFLE <input type="checkbox"/>		SEMI AUTOMATIC <input type="checkbox"/>		BOLT ACTION <input type="checkbox"/>		LEVER ACTION <input type="checkbox"/>	
												SHOTGUN <input type="checkbox"/>		PUMP <input type="checkbox"/>		SINGLE SHOT <input type="checkbox"/>		DBL BARREL <input type="checkbox"/>	

CUSTOMER'S RIGHT THUMB PRINT REQUIRED ON BACK OF ORIGINAL

Live Scan Fingerprint Information

Municipal Code §33.0304 - Applicant and Employees to Furnish Fingerprints and Photographs

For the purpose of investigation and for regulation of the occupation or business during the time it is licensed, applicants, *responsible persons*, managers, or *employees* may be required to furnish their fingerprints and photographs. ***Fingerprints must be taken by a governmental agency.*** The *Chief of Police* shall forward the fingerprints to the Identification Division of the State of California, Department of Justice, or the Federal Bureau of Investigation, for identity confirmation and criminal histories.

The following are acceptable US Governmental Agencies located in San Diego County:

CHULA VISTA

Chula Vista Police Department
315 Fourth Street
Chula Vista, CA 92010
(619) 409-5954
M - F (8am-12pm) **Appointments Only**
M - F (1pm-4pm) **Appointments Only**
www.chulavistapd.org

LA JOLLA

UCSD Police Department
9500 Gilman Dr #0017
La Jolla, CA 92093
(858) 534-4361 **Appointments Only**
M - F 9am-3pm

SAN DIEGO

San Diego City Schools Police Services/EOC Bldg
4100 Normal St
San Diego, CA 92103-2682
(619) 725-7015 **Appointments**
(619) 725-7014 (Information)
T - F (8:30am-1pm) **Walk In**
T - F (2pm-4pm) **Appointments Only**
Not open to general public on Monday's
Closed School Holidays

SAN DIEGO - LSID X54/ML1

San Diego Community College Police
1536 Frazee Road, 1st Floor
San Diego, CA 92108
Contact: (619) 388-6416
M-Th (7:30am-5pm) **Wlk**
F (7:30am-12 noon) **Wlk**
E-mail address: dpicou@sdcc.edu

ESCONDIDO

Escondido Police Department
700 W Grand Ave
Escondido, CA 92025
Contact: (760) 839-4431
M - F (9:00am-3:30pm) **Appointments Only**

LA MESA

La Mesa Police Department (Storefront)
6119 Lake Murray Blvd
La Mesa, CA 91942
(619) 667-1342
M, T, W (10am-4pm) **Appointments/Walk In**
Th, F (9am-3pm) **Appointments/Walk In**

SAN DIEGO

San Diego State University
5500 Campanile Dr
SSE-1410
San Diego, CA 92182
(619) 594-3193
M - F (8am-4pm) **Appointments Only**

REQUEST FOR LIVE SCAN SERVICE
Applicant Submission

ORI: CA0349400 Type of Application: (check one) ☐ Employment ☒ License, Certification, Permit ☐ Volunteer
Code assigned by DOJ

Job Title or Type of License, Certification or Permit: (Check one) ☐ Secondhand Dealer ☒ Pawnbroker

Agency Address Set Contributing Agency:

DOJ/BCIA Secondhand Dealer/Pawnbroker Unit

05467

Agency authorized to receive criminal history information

Mail Code (five-digit code assigned by DOJ)

P.O. Box 903387

N/A

Street No. Street or PO Box

Contact Name (Mandatory for all school submissions)

Sacramento

CA

94203-3870

(916) 227-3688

City

State

Zip Code

Contact Telephone No.

Name of Applicant:

(Please print)

Last

First

MI

AKA's:

Last

First

CDL No. _____

DOB: _____

SEX: ☐ Male ☐ Female

Misc. No. BIL - Applicant to pay at site

Agency Billing Number (if applicable)

HT: _____

WT: _____

Misc. No. _____

EYE Color: _____

HAIR Color: _____

Home Address: (Applies only if Youth Org/HRA or Public Utility submission)

N/A

POB: _____

Street or PO Box

SOC: _____

N/A

City, State and Zip Code

Your Number: _____

OCA No. (Agency Identifying No.)

Level of Service ☒ DOJ

☐ FBI

If resubmission, list Original ATI No. _____

Employer:

(Additional response for Department of Social Services, DMV/CHP licensing, and Department of Corporations submissions only)

N/A

Employer Name

N/A

N/A

Street No.

Street or PO Box

Mail Code (five digit code assigned by DOJ)

N/A

N/A

City

State

Zip Code

()

Agency Telephone No. (Optional)

Live Scan Transaction Completed By: _____

Name of Operator

Date _____

Transmitting Agency

ATI No. _____

Amount Collected/Billed